



OFFICE OF OCCUPATIONS AND PROFESSIONS

P.O. Box 1360, Frankfort, Kentucky 40602 ~ 911 Leawood Drive, Frankfort, Kentucky 40601
(502) 564-3296 ~ <http://dop.ky.gov>

NAME / ADDRESS CHANGE FORM

APPLICATION INSTRUCTIONS

1. This application must be printed and mailed in with proof of name/address change.
2. Proof for Name Change:
 - a) Copy of Marriage Certificate
 - b) Copy of Name Change Order
 - c) Copy of updated Driver's License
3. Proof for Address Change:
 - a) Business letterhead/stationary
 - b) Piece of mail to individual's new address (i.e. utility bill, phone bill, library notice, etc...)
 - c) Copy of updated Driver's License
4. The completed form and supporting documentation may be submitted by mail to the Office of Occupations and Professions, P.O. Box 1360, Frankfort, Kentucky, 40602 or may be hand delivered to the Office of Occupations and Professions, 911 Leawood Drive, Frankfort, Kentucky, 40601.



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NAME / ADDRESS CHANGE FORM

Type of Change

☐ Name Change

☐ Place of Business Change

☐ Address Change

E-mail Address: _____

Please Complete the Following for Identification Purposes

Licensing Board: _____ Name: _____

Lic / Cert #:

Social Security Number

Today's Date

_____-_____-_____/_____/_____/_____

Signature: _____

Name Change Only

Previous Name

New Name

Last Name _____

Last Name _____

First Name _____

First Name _____

Maiden _____

Middle Name _____

Address Change Only: ☐ Residence ☐ Business

Name or Business Name

Previous Address

New Address

Street Address

Street Address

PO Box

APT #

PO Box

APT #

City

County

City

County

State

Zip

State

Zip